

CLAIMS ONLY							Application Number 10680294	Filing Date
							Applicant(s)	
							* May be used for additional claims or amendments	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1						51	
2							52	
3	<i>cancel</i>						53	
4							54	
5							55	
6	1						56	
7							57	
8	1						58	
9							59	
10							60	
11							61	
12							62	
13							63	
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15							65	
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41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
Total Indep	2						Total Indep	
Total Depend	5						Total Depend	
C... 115	7						Total Claims	